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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Becerra for Congress				
ADDRESS (number and street) P.O. Box 71584				
CITY, STATE, and ZIP CODE				
Los Angeles	CA 9007	71		
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER	
Xavier Becerra	House CA 34		C00264101	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON	/	<i>!</i>
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
Mr. Jim Mangia	St. John's Well Child & Family Center		day, year)	
-			05/23/2014	2400.00
4139 Camino Real	39 Camino Real Transaction ID : C10336322 Occupation			
Los Angeles CA 90065-3961	President & CEO			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
Mr. Jim Mangia	St. John's Well Child & Family Center		day, year)	
Will of Warigia	on commo won on a com		05/23/2014	2600.00
4139 Camino Real	Camino Real			
	Transaction ID : C10336462			
Los Angeles CA 90065-3961	Occupation			
	President & CEO		D-4- (Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
	Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
			day, year)	
	Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation		Date (month, day, year)	Amount
SIGNATURE (optional) Robert Herrera	[Electronically Filed] DATE 05/24/2014		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	

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